

Sexually transmitted diseases

Extract from the Annual Report of the Chief Medical Officer of the Department of Health and Social Security for the year 1976

The sexually transmitted diseases continue to be controlled by the efficiency and co-ordination of all grades of staff in the clinics. Most patients attend on their own initiative but increasing numbers are referred by their general practitioners or as the result of contact tracing by health workers based at the clinics. The steady and alarming rate of increase during the 1960s has been reduced in the 1970s. For example—between 1966 and 1970 there was a 42% increase in post-pubertal gonorrhoea, whereas there was only a 4.7% rise between 1971 and 1975.

Syphilis, gonorrhoea, and chancroid

Table 1 shows the number of cases of syphilis, gonorrhoea, and chancroid reported from clinics in England in the first six months of 1976, compared with the figures for the second six months of 1975. Table 2 gives a similar comparison for cases of the other sexually transmitted diseases.

Rates of infection per 100 000 of population (Tables 3 and 4) continued to compare favourably

Table 1 *Cases of syphilis, gonorrhoea, and chancroid reported in the first six months of 1976, with figures for the second six months of 1975 in parentheses*

	Numbers of cases					
	Total		Males		Females	
Syphilis						
Early	1179	(1180)	1001	(1002)	178	(178)
Primary and secondary only	819	(835)	719	(727)	100	(108)
Late	681	(613)	468	(406)	213	(207)
Congenital	62	(79)	20	(43)	42	(36)
Gonorrhoea						
All forms	26 670	(31 774)	16 871	(20 198)	9799	(11 576)
Post-pubertal	26 642	(31 747)	16 868	(20 189)	9774	(11 558)
Under 16	283	(294)	46	(62)	237	(232)
16-19	5072	(6395)	2035	(2593)	3037	(3802)
20-24	8796	(10 525)	5335	(6560)	3461	(3965)
25-34	9138		6760		2378	
35-44	2561	(14 533)	2024	(10 974)	537	(3559)
45 and over	792		668		124	
Chancroid	26	(42)	22	(40)	4	(2)

Figures for the second half of 1976 will be published in next year's *Report*.

Table 2 *Other sexually transmitted diseases reported in the first six months of 1976, with figures for the second six months of 1975 in parentheses*

	Numbers of cases					
	Total		Males		Females	
Lymphogranuloma venereum	14	(19)	13	(18)	1	(1)
Granuloma inguinale	10	(6)	7	(5)	3	(1)
Non-specific genital infection (NSGI)	43 285	(44 401)	34 379	(35 784)	8906	(8617)
NSGI with arthritis	241	(250)	228	(240)	13	(10)
Trichomoniasis	9352	(10 337)	767	(773)	8585	(9564)
Candidosis	17 842	(18 374)	3230	(3027)	14 612	(15 347)
Scabies	1212	(1438)	988	(1 140)	224	(298)
Pediculosis pubis	2544	(2657)	1795	(1839)	749	(818)
Genital herpes	3341	(3319)	2149	(2170)	1192	(1149)
Genital warts	10 918	(10 028)	7160	(6476)	3758	(3552)
Genital molluscum	455	(373)	327	(245)	128	(128)
Other treponemal diseases	540	(506)	349	(315)	191	(191)
Other conditions requiring treatment in a centre	18 846	(19 820)	12 189	(13 205)	6657	(6615)
*Other conditions not requiring treatment in a centre	43 860	(43 066)	27 457	(26 775)	16 403	(16 291)

Figures for the second half of 1976 will be published in next year's *Report*.

*Other conditions referred elsewhere are included in these totals.

Table 3 The venereal diseases—new cases per 100 000 population, by age, seen at hospital clinics in England 1972–76

Disease	1972			1973			1974			1975			First half-year 1976		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Early syphilis															
All ages	6.00	1.25	3.56	7.98	0.90	4.59	8.43	1.56	4.91	8.52	1.41	4.87	4.43	0.75	2.54
Early syphilis (primary and secondary only)															
All ages	4.46	0.77	2.56	5.75	0.90	3.26	6.17	1.06	3.55	6.21	0.85	3.46	3.18	0.42	1.76
Under 16	0.02	0.12	0.07	0.07	0.07	0.07	0.05	0.04	0.04	0.05	1.00	0.03	0.13	0.23	0.18
16 and 17	3.84	1.45	2.67	3.02	2.06	2.56	2.63	3.23	2.92	4.71	1.50	3.14	4.30	1.50	2.93
18 and 19	7.47	4.32	5.93	9.60	4.24	6.99	11.50	5.37	8.27	8.89	4.37	6.92	10.23	1.79	6.11
20–24	13.09	3.83	8.49	15.52	4.51	10.07	18.74	4.59	11.74	17.86	3.83	10.97	2.83	0.25	1.49
25 and over	5.24	0.49	2.73	7.00	0.65	3.64	7.27	0.81	3.86	7.40	0.68	3.84	2.07	0.89	1.47
Late syphilis															
All ages	3.40	1.66	2.50	3.52	1.58	2.52	3.64	1.59	2.58	3.54	1.67	2.58	0.36	0.09	0.13
Congenital syphilis															
All ages	0.29	0.40	0.34	0.27	0.43	0.35	0.25	0.45	0.35	0.34	0.38	0.36	0.09	0.18	0.13
Gonorrhoea (post-pubertal)															
All ages	155.64	77.10	115.28	167.40	87.04	126.10	165.19	87.00	125.06	165.20	90.56	126.91	74.61	41.05	57.40
Under 16	1.81	7.36	4.52	2.53	8.09	5.24	1.99	8.19	5.01	1.83	8.02	4.84	1.98	10.73	12.15
16 and 17	144.61	362.92	251.24	167.40	405.56	233.59	165.94	376.75	268.74	158.00	393.11	272.81	145.72	227.66	185.75
18 and 19	487.50	575.43	530.40	551.55	664.28	606.44	546.94	665.91	605.04	548.21	660.44	616.92	326.70	221.72	275.39
20–24	675.71	393.06	535.40	751.15	450.75	602.41	759.88	464.05	613.63	748.91	482.94	618.25	54.79	16.25	34.74
25 and over	143.15	36.26	86.61	150.80	41.61	93.08	147.19	41.32	91.27	147.83	42.53	92.24	0.10	0.02	0.06
Chancroid															
All ages	0.21	0.01	0.11	0.15	0.01	0.08	0.17	0.02	0.09	0.29	0.03	0.15	0.10	0.02	0.06

*These rates were based on fewer than 10 events and consequently their reliability as a measure may be affected.

†Indicates that there were no events.

Table 4 Other sexually transmitted diseases and other conditions—new cases per 100 000 population at all ages and by sex seen at hospital clinics in England 1971–76

Disease	1972			1973			1974			1975			First half-year 1976		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Lymphogranuloma venereum	0.24	0.02	0.13	0.23	0.03	0.13	0.17	0.03	0.10	0.15	0.02	0.08	0.06	0.01	0.03
Granuloma inguinale	0.01	0.01	0.01	0.02	0.01	0.02	0.03	0.02	0.02	0.04	0.02	0.03	0.03	0.01	0.02
Non-specific genital infection	277.65	60.61	166.13	301.70	62.54	178.80	306.64	62.54	181.35	306.59	69.58	185.01	152.05	37.41	93.25
Non-specific genital infection with arthritis	1.99	0.10	1.02	1.93	0.08	0.98	1.73	0.09	0.89	2.04	0.13	1.06	1.01	0.05	0.52
Trichomoniasis	6.82	73.38	41.02	7.16	73.48	41.22	6.28	73.81	40.94	6.62	77.03	42.74	3.39	36.06	20.15
Candidiasis	19.34	107.16	64.46	21.66	113.20	68.68	23.17	114.21	72.05	25.26	123.18	75.49	14.29	61.37	38.44
Scabies	9.93	2.25	5.99	9.36	1.90	5.53	9.91	2.11	5.90	9.97	2.27	6.02	4.37	0.94	2.61
Pubic lice (pediculosis pubis)	13.45	4.50	8.85	13.97	4.73	9.23	15.85	5.68	10.63	16.01	6.25	11.01	7.94	3.15	5.48
Herpes simplex	13.84	5.31	9.46	14.71	6.48	10.48	15.56	7.25	11.30	18.29	8.72	13.38	9.50	5.01	7.20
Warts (condylomata acuminata)	45.54	23.42	34.17	51.19	26.48	38.50	55.09	26.36	40.34	57.86	29.62	43.38	31.67	15.78	23.52
Molluscum contagiosum	2.03	0.74	1.37	2.13	0.74	1.42	2.04	0.86	1.43	2.31	0.97	1.62	1.45	0.54	0.98
Other treponemal diseases	2.55	1.17	1.84	2.43	1.32	1.86	3.13	1.50	2.30	2.74	1.61	2.16	1.54	0.80	1.16
Other conditions requiring treatment in a centre	101.85	39.32	69.72	111.10	44.0	76.67	109.42	45.90	76.82	112.97	53.66	82.54	53.91	27.96	40.60
Other conditions not requiring treatment in a centre	208.90	110.19	158.18	235.70	126.30	179.50	231.93	130.59	179.92	233.85	134.89	183.09	119.04	67.57	92.64

*These rates were based on fewer than 10 events and consequently their reliability as a measure may be affected.

with those of other developed countries in the world, where reliable statistics are available.

Since the Council of Europe recommendations came into force in 1976 the age bands for the collection of statistics on sexually transmitted diseases have been changed. Because of this change direct comparisons in certain groups (see bottom of Table 1) are not possible, and the bracketing of certain groups has been necessary. In addition there have been changes in the classification of complications of gonorrhoea, these being modifications made, in conjunction with the Scottish Home and Health Department, of the Council of Europe recommendations.

It is possible that some of these new categories were not reported by clinics in the first half of 1976 and more reliable data will be available next year.

Imported cases

In the first half of 1976, 113 out of 819 cases (13.8%) of early infectious syphilis (primary and secondary) were believed to have been contracted abroad (126 out of 835 (15.1%) in the second half of 1975). The corresponding figures for post-pubertal gonorrhoea were 863 out of 26 642 (3.2%) (957 out of 31 747 (3%) in the second half of 1975).

Contacts

In the first half of 1976, 1270 contacts of cases of syphilis were approached to attend a clinic. As a result, 548 males and 223 females attended; of these, 153 males and 90 females were found to have syphilis. The corresponding figures for gonorrhoea were: 20 827 contacts were approached to attend a clinic; 5048 males and 7661 females attended and of these 2740 males and 5684 females were found to have gonorrhoea.

The present position

Hospital medical staff engaged in genitourinary medicine in England and Wales at 30 September 1976 totalled 210 (185.1 whole-time equivalents (WTE), including 103* (94.7 WTE) consultants, 32 (30.0 WTE) senior registrars, and 35 (31.5 WTE) registrars, compared with a total of 206 (180.8 WTE) at 30 September 1975, with 100 (91.1 WTE) consultants, 29 (27.9 WTE) senior registrars, and 37 (33.5 WTE) registrars. At 30 September 1975, 76 out of 110 consultants specialising in genitourinary medicine in Great Britain were full time.

In 1976 the proceedings of the Anglo-American conference on sexually transmitted diseases, held in London in June 1975, were published (Catterall and Nicol, 1976). The conference was sponsored by the Royal Society of Medicine and was introduced

by the President of the Royal Society of Medicine, Sir John Stallworthy, and the Chief Medical Officer of the DHSS, Sir Henry Yellowlees. Papers were presented by British and American speakers on: (1) World trends in STD, (2) Control through health care systems, (3) The changing clinical picture in gonorrhoea and non-gonococcal infections, (4) Immunology of *Chlamydia*, (5) Virus diseases: (i) Genital herpes, (ii) Hepatitis, (6) Syphilis, (7) Responsibility for education and prevention programmes, and (8) Reflections on the conference.

A summary report is available (World Health STD was organised in Vienna by WHO Regional Office for Europe in 1976. Topics for the meeting were:

1. Extent and trends of sexually transmitted disease
2. Case finding (a) by screening (b) by contact tracing
3. Economic aspects
4. Health education
5. Training of personnel

A summary report is available (World Health Organisation, 1976).

Research projects in sexually transmitted disease continue to be supported by the MRC and the DHSS. In addition, DHSS provided special financial support which enabled 10 doctors, nurses, and technicians to travel abroad for research purposes during 1976. Their reports again show the value of these visits.

Towards the end of 1976 a new strain of gonococcus resistant to penicillin, because it produced penicillinase (β lactamase), was reported in the United States and in this country, with contact sources in South East Asia and Africa. Action has been taken by WHO to monitor the emergence of this strain which although completely resistant to penicillin is at present sensitive to spectinomycin (Lancet, 1976; Public Health Laboratory Service, 1976; Wilkinson *et al.*, 1976). The DHSS took the necessary steps to ensure that physicians in charge of clinics were aware of this development.

References

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*In the Report the figure of 193 was erroneously given